

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	RH		6/26
O.I.P.E. CLASSIFIER	LR	32	7/5
FORMALITY REVIEW	HS	1127	08/14/01
RESPONSE FORMALITY REVIEW	Zm	927	10/02/01

## INDEX OF CLAIMS

✓	..... Rejected	N	..... Non-elected
=	..... Allowed	I	..... Interference
—	(Through numeral)... Canceled	A	..... Appeal
÷	..... Restricted	O	..... Objected

Claim		Date
	Original	7-12
Final	✓ 03 03	
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Claim		Date						
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**BEST AVAILABLE COPY**

**If more than 150 claims or 10 actions  
staple additional sheet here**

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10/21/88  
1744  
573  
10-02-21